FINAL BILL REPORT ESSB 5105

C 94 L 11

Synopsis as Enacted

Brief Description: Addressing the conditional release of persons committed as criminally insane to their county of origin.

Sponsors: Senate Committee on Human Services & Corrections (originally sponsored by Senators Carrell, Conway, Stevens, Schoesler, Becker and Shin).

Senate Committee on Human Services & Corrections House Committee on Public Safety & Emergency Preparedness

Background: A defendant who pleads not guilty by reason of insanity may be found criminally insane by a court or jury. The court or jury must find that, due to a mental disease or defect, the defendant was unable at the time of the offense to perceive the nature and quality of his or her actions or was unable to perceive that those actions were wrong. A defendant who has been found criminally insane may be committed to a state hospital if the court or jury finds that the defendant is a danger to public safety or presents a substantial likelihood of committing further criminal acts. The length of treatment is up to the maximum term for which the defendant could have been sentenced if convicted of the underlying crime.

A patient who is committed to the state hospital as criminally insane may petition at least once every six months for conditional release. The state hospital must review this petition and forward it to the superior court in the county where the patient was committed with a recommendation as to whether or not the petition should be granted. If the hospital supports the petition, it must describe the conditions under which it believes release may be appropriate.

Summary: The state hospital may not support a petition for conditional release for a patient committed as criminally insane except under the condition that the patient must reside in the patient's county of origin, which means the county which ordered the commitment. An exception is available if the state hospital determines that the county of origin would be inappropriate considering any court-issued protection orders, victim safety concerns, the availability of appropriate treatment, negative influences on the person, or the location of family or other persons or organizations offering support to the patient. When a state hospital assists in developing a placement which is outside of the county of origin, and there are two or more options for placement, it must endeavor to develop the placement in a manner that does not have a disproportionate effect on a single county.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Votes on Final Passage:

Senate 49 0 House 90 6

Effective: July 22, 2011.

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